

**AGENCY INSPECTION AND OTHER  
ELECTRONIC DATA REVIEW**

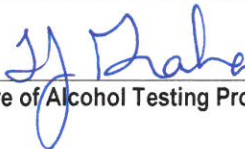
Agency: Polk County SO

Instrument Serial Number: 80-001055

AGENCY INSPECTION DATA REVIEW		
Agency Inspector: <u>Tequila L Hammonds</u>	Date of Inspection: <u>04/28/2019</u>	Time of Inspection: <u>09:56:17</u>
Agency Inspection Discrepancy: <input type="checkbox"/> Incomplete <input type="checkbox"/> Untimely/Not Received <input type="checkbox"/> Erroneous Information <input checked="" type="checkbox"/> Procedural <input type="checkbox"/> Other _____		
<input type="checkbox"/> Agency Inspection Not Conducted or Records regarding Agency Inspection have not been uploaded.		
<input type="checkbox"/> Lot Number <input type="checkbox"/> Expiration Date for _____ g/ 210L <input type="checkbox"/> Alcohol Reference Solution <input type="checkbox"/> Dry Gas Standard is <input type="checkbox"/> Incorrect <input type="checkbox"/> Expired.		
<input checked="" type="checkbox"/> FDLE/ATP Form 39 states in part, "If a test must be repeated, the REASON must be entered when prompted and recorded in the Remarks section of FDLE/ATP Form 40 Agency Inspection Report – Intoxilyzer 8000. The <input checked="" type="checkbox"/> REASON for repeating the following test(s); OR the <input checked="" type="checkbox"/> Possible Cause and Corrective Action Taken on the following test(s) was not recorded: <input type="checkbox"/> Alcohol Free Subject Test <input type="checkbox"/> Mouth Alcohol Test <input type="checkbox"/> Alcohol Free Test <input type="checkbox"/> Interferent Detect Test <input type="checkbox"/> 0.05 g/210L Test <input checked="" type="checkbox"/> 0.08 g/210L Test <input type="checkbox"/> 0.20 g/210L Test <input type="checkbox"/> 0.08 g/210L Dry Gas Standard Test		
<input type="checkbox"/> FDLE/ATP Form 39 states in part, "If the instrument does not comply with the requirements of Chapter 11D-8, FAC, remove the instrument from service and notify the Department Inspector." <input type="checkbox"/> The Department Inspector was not notified. However, the issue was satisfactorily corrected and the repeated Agency Inspection complies with the requirements of Chapter 11D-8, FAC. <input type="checkbox"/> The Department Inspector was not notified. However, the repeated Agency Inspection does not comply with the requirements of Chapter 11D-8, FAC and the instrument was correctly removed from evidentiary use. <input type="checkbox"/> The Department Inspector was not notified. The repeated Agency Inspection does not comply with the requirements of Chapter 11D-8, FAC and the instrument was not removed from evidentiary use.		
<input type="checkbox"/> The Agency Inspection is noted as "Complies" when it does not comply with the requirements of Chapter 11D-8, FAC.		
<input type="checkbox"/> Other: _____		

OTHER ELECTRONIC DATA REVIEW	
<input type="checkbox"/> Login Records Date: _____	Comments: _____
<input type="checkbox"/> Cylinder Change Records Date: _____	
<input type="checkbox"/> Control Test Records Date: _____	
<input type="checkbox"/> Diagnostic Check Records Date: _____	

CORRECTIVE ACTION
<input checked="" type="checkbox"/> Record hand-written amendments on the FDLE/ATP Form 40, Agency Inspection Report, initial and date the amendments, mark the report "AMENDED", and forward a copy to the Department Inspector by <u>06/30/2019</u> (Date).
<input type="checkbox"/> Provide a written explanation regarding the referenced item(s) to the Department Inspector by _____ (Date).
<input type="checkbox"/> Upload the Agency Inspection(s).
<input type="checkbox"/> Remove the instrument from evidentiary use until otherwise directed by the Department.
<input type="checkbox"/> No action required
<input type="checkbox"/> Other: _____

  
Signature of Alcohol Testing Program Staff Member

6/17/2019  
Date

# Florida Department of Law Enforcement

## Alcohol Testing Program

### Inspection Test Electronic Data

CMI, Inc. Intoxilyzer 8000 Serial Number: 80-001055

Agency POLK COUNTY SO	Date 04/28/2019	Type Agency Inspection	
Inspector HAMMONDS,TEAQUILA,L	Time 09:56:17	Software 8100.27	
0.05 Lot # 201802B	0.08 Lot # 201808E	0.20 Lot # 201802G	0.08 Gas Lot # 22817080A4
Expiration 02/06/2020	Expiration 08/22/2020	Expiration 02/22/2020	Expiration 10/05/2019

Number of Simulators 5

Compliance Yes

Check or Test	Result	Test	Result
Diagnostic Check (Pre-Inspection): OK	Yes	Alcohol Free Test # 1	0.000
Date and/or Time Adjusted	No	0.05 g/210L Test # 1	0.049
Minimum Sample Volume Check: OK		0.08 g/210L Test # 1	0.080
Barometric Pressure Sensor Check: OK		0.20 g/210L Test # 1	0.200
Alcohol Free Subject Test: 0.000	Yes	0.08 g/210L Dry Gas Std Test # 1	0.000
Mouth Alcohol Test: Slope Not Met	Yes	0.08 g/210L Dry Gas Std Test # (Repeat) 1	0.080
Interferent Detect Test: Interferent Detect	Yes	Interferent Detect Test # 1	INT
Diagnostic Check (Post-Inspection): OK	Yes	Alcohol Free Test # 2	0.000
Alcohol Free Test: OK	Yes	0.05 g/210L Test # 2	0.050
0.05 g/210L Test: OK	Yes	0.08 g/210L Test # 2	0.079
0.08 g/210L Test: OK	Yes	0.20 g/210L Test # 2	0.200
0.20 g/210L Test: OK	Yes	0.08 g/210L Dry Gas Std Test # 2	0.000
0.08 g/210L Dry Gas Std Test: OK	Yes	0.08 g/210L Dry Gas Std Test # (Repeat) 2	0.080
		Interferent Detect Test # 2	INT
		Alcohol Free Test # 3	0.000
		0.05 g/210L Test # 3	0.050
		0.08 g/210L Test # 3	0.080
		0.20 g/210L Test # 3	0.201
		0.08 g/210L Dry Gas Std Test # 3	0.000
		0.08 g/210L Dry Gas Std Test # (Repeat) 3	0.080
		Interferent Detect Test # 3	INT

**Remarks:**

08: Control Outside Tolerance.

Data Download Date/Time 04/29/2019 17:40

Printed: 17 June 2019

COBRA ©1997-2014 CMI, Inc.

## Graham, Thomas

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**From:** Hammonds, Teaquilia <THammonds@polksheriff.org>  
**Sent:** Tuesday, June 18, 2019 10:54 AM  
**To:** Graham, Thomas  
**Subject:** RE: Data review  
**Attachments:** April 2019 Amended report.pdf

6/18/19  
JD

**Follow Up Flag:** Follow up  
**Flag Status:** Flagged

Mr. TJ

Thank you for contacting me in regards to Instrument 10-001055. Please find attached a copy of the amended report on this instrument. It was clearly my fault the readings came out as such. I forgot to attach the dry cylinder to the instrument in time.

Sorry for responding so late and please let me know if there is anything else I need to provide.

Thank you,

D/D Teaquilia Hammonds #7435  
Inmate Intake Trusty Supervisor  
Polk County Sheriff's Office  
(863)287-9128 cell  
(863)534-7908 work

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**From:** Graham, Thomas <ThomasGraham@fdle.state.fl.us>  
**Sent:** Monday, June 17, 2019 3:41 PM  
**To:** Hammonds, Teaquilia <THammonds@polksheriff.org>  
**Subject:** Data review

**\*\* This Email Originated Outside of PCSO! \*\***  
**\*\*DO NOT CLICK links or attachments unless you recognize the sender and know the content is safe.\*\***

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Ms. Hammonds,

Please see the attachment regarding an Agency Inspection performed on 4/28/2019 on instrument #80-001055.

If you have any questions, please give me a call.

TJ Graham, D-ABFT-FA  
Quality Assurance Manager  
Alcohol Testing Program  
Florida Department of Law Enforcement  
Office: 850-617-1285  
Cell: 850-445-7938

PLEASE NOTE : Florida has a very broad public records law. Most written communications to or from state officials regarding state business are considered to be public records and will be made available to the public and the media upon request. Your e-mail messages may, therefore, be subject to public disclosure.



# Amended

## Florida Department of Law Enforcement Alcohol Testing Program

6/18/19  
JO

### AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: POLK COUNTY SO

Time of Inspection: 09:56

Date of Inspection: 04/28/2019

Serial Number: 80-001055

Software: 8100.27

Check or Test	YES	NO
Date and/or Time Adjusted		No
Diagnostic Check (Pre-Inspection): OK	Yes	
Alcohol Free Subject Test: 0.000	Yes	
Mouth Alcohol Test: Slope Not Met	Yes	
Interferent Detect Test: Interferent Detect	Yes	
Diagnostic Check (Post-Inspection): OK	Yes	

Alcohol Free Test (g/210L)	0.05g/210L Test (g/210L) Lot#: 201802B Exp: 02/06/2020	0.08g/210L Test (g/210L) Lot#: 201808E Exp: 08/22/2020	0.20g/210L Test (g/210L) Lot#: 201802G Exp: 02/22/2020	0.08 g/210L Dry Gas Std Test (g/210L) Lot#: 22817080A4 Exp: 10/05/2019
0.000	0.049	0.080	0.200	0.000 / 0.080
0.000	0.050	0.079	0.200	0.000 / 0.080
0.000	0.050	0.080	0.201	0.000 / 0.080

Number of Simulators Used: 5

**Remarks:**

08: Control Outside Tolerance.

*Dry gas cylinder wasn't tighter*

The above instrument complies ( X ) does not comply ( ) with Chapter 11D-8, FAC.

I certify that I hold a valid Florida Department of Law Enforcement Agency Inspector Permit and that I performed this inspection in accordance with the provisions of Chapter 11D-8, FAC.

TEAQUILA L HAMMONDS

Signature and Printed Name

04/28/2019  
Date

# Amended Florida Department of Law Enforcement Alcohol Testing Program

5/2/19  
JD

## AGENCY INSPECTION REPORT - INTOXILYZER 8000

Agency: POLK COUNTY SO  
 Time of Inspection: 09:56

Date of Inspection: 04/28/2019

Serial Number: 80-001055  
 Software: 8100.27

Check or Test	YES	NO
Date and/or Time Adjusted		No
Diagnostic Check (Pre-Inspection): OK	Yes	
Alcohol Free Subject Test: 0.000	Yes	
Mouth Alcohol Test: Slope Not Met	Yes	
Interferent Detect Test: Interferent Detect	Yes	
Diagnostic Check (Post-Inspection): OK	Yes	

Alcohol Free Test (g/210L)	0.05g/210L Test (g/210L) Lot#: 201802B Exp: 02/06/2020	0.08g/210L Test (g/210L) Lot#: 201808E Exp: 08/22/2020	0.20g/210L Test (g/210L) Lot#: 201802G Exp: 02/22/2020	0.08 g/210L Dry Gas Std Test (g/210L) Lot#: 22817080A4 Exp: 10/05/2019
0.000	0.049	0.080	0.200	0.000 / 0.080
0.000	0.050	0.079	0.200	0.000 / 0.080
0.000	0.050	0.080	0.201	0.000 / 0.080

Number of Simulators Used: 5

**Remarks:**

08: Control Outside Tolerance.

Dry gas cylinder wasn't tighter

The above instrument complies ( ☒ ) does not comply ( ☐ ) with Chapter 11D-8, FAC.

I certify that I hold a valid Florida Department of Law Enforcement Agency Inspector Permit and that I performed this inspection in accordance with the provisions of Chapter 11D-8, FAC.

TEAQUILIA L HAMMONDS

TEAQUILIA L HAMMONDS

Signature and Printed Name

04/28/2019  
 Date